OGGWOTH

PTO/SB/06 (08-03)

Approved for use through 7/31/2006. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE FEE BASIC FEE (37 CFR 1.16(a)) OR **TOTAL CLAIMS** (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS (37 CFR 1.16(b)) minus 3 = X S OR X \$ MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR = * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL OR **TOTAL** AIMS A\$ AMENDED – PART IÌ OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE RATE ADDI-ADDI-ENT **EXTRA AFTER PREVIOUSLY** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE NDME Total Minus (37 CFR 1.16(c)) OR Independent (37 CFR 1.16(b)) Minus 面 = X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + s TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST Ω PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-EN **AFTER PREVIOUSLY EXTRA** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total (37 CFR 1.16(c)) Minus ENDMI X S OR Minus a OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE ADD'L FEE OR (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE ADDL RATE ADDI-**EXTRA** PREVIOUSLY ENDMENT AFTER TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus = (37 CFR 1.16(c)) X S = OR X S = Independent (37 CFR 1.16(b)) Minus OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the entry in column 1 is less than the entry in column 2, while 0 in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

plication or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

NL 000403

		CLAIMS AS	(Colum	nn 2)		SMALL EN TYPE		OR	OTHER SMALL			
TOTAL CLAIMS			4					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			Basic Fee	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			% minus 20=		•			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			<i>j</i> minus 3 =		•			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							1	TOTAL		OR	TOTAL	910
CLAIMS AS AMENDED - PART II								SMALLE	NTITY	OR	OTHER SMALL	
4		(Column 1) CLAIMS REMAINING		HGH	IEST IBER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
EN		AFTER AMENDMENT	. 3		FOR	EXTRA			FEE			FEE
707	Total	. 8	Minus	-2		=		X\$ 9=		OR	X\$18=	
AMENDMENT A	Independent	• /	Minus	··· /	7 A 194	=		X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JUTIPUE DEP	ENUEN	CLAIM		j	+135=		OR	+270=	
						•		TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	Rd
	B)	(Column 1)		(Colu	ımn 2)	(Column 3	L	ADDI L. TEE		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NU! PREV	HEST MBER MOUSLY O FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 15	Minus	2	B)	=		X\$ 9=		OR	X\$18=	
MEN	independent	. 12	Minus	***	3	•]	X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=	·	OR	+270=	
	6-10-04							TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE	
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O IN		REMAINING AFTER		NU PREV	MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	· 15.	Minus	2	0	-		X\$ 9=		ОЯ	X\$18=	
AMENDMEN	Independent	· /	Minus		5	- [4	X40=		OF	X80=	
F	FIRST PRES	ENTATION OF N	IULTIPLE DE	-END\$	NI CCAIN		ئـ	+135=		OR	+270=	
	"If the entry in column 1 is less than the entry in column 2, write "V" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "3."									OF	TOTA ADDIT. FE	
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												